

Viewpoint ▶ The Multi-disciplinary Nature of Reading— A Personal Journey

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ABSTRACT

Many optometric patients have reading difficulties, and the road to becoming an efficient reader can be long and challenging for them and their families. Here we would like to tell the story of a young professional who, as an adult, comes to understand her lifelong reading difficulties through the treatment of both visual and non-visual problems. Her story highlights the need for multidisciplinary care for patients who struggle with reading.

Keywords: AD/HD, dyslexia, reading disability, vision therapy

Introduction

Reading is a complicated neurocognitive process that neuroscientists are just beginning to unravel, as its complexities lie in multiple brain centers.¹ Optometrists who offer vision therapy (VT) have a special interest in reading because of the relationship between vision and reading. Parents often ask whether a child's difficulty with reading is because of her vision, but this can be a difficult question to answer. Once treatment begins, we look for evidence that the interventions are helping the child to become a better reader. Sometimes the connection between the interventions and reading is rapid and noticeable to parents, teachers, and to children themselves. In other instances the connection is slow, muddled, or does not occur. The challenge of predicting when visual interventions are going to make a significant difference in a child's reading speaks to both the multivariate nature of reading and the complexity and number of a child's visual and non-visual problems.² Vision therapy, like any sustained therapy, takes time, energy, commitment, and resources. The intent is for parents and children to be rewarded for their efforts. We try to sort out these factors and set realistic goals with our patients. We know the stakes are high for each child and each family, and we understand the pervasive power of reading in so many of life's choices.

In this article, we present a first person account of an adult (the first author) with a long history of reading, visual, and attention difficulties, who was able to obtain a PhD in neuropsychology and develop a flourishing pediatric practice despite her difficulties. As an adult, she happened upon a range of treatment options for her reading issues, and here we detail her journey to become a more efficient and productive reader and practitioner. We hope that her story highlights some of the challenges that we all face in answering the important question of how to make a child a better reader.

Case Study

Early Childhood through High School

I was raised in a home where reading was valued. My parents read to me every night as a young child. I had access to all types of books and was encouraged by my parents and teachers to go to the library during the summer months. My school district proudly purported itself to be the best of the best and to turn out only the smartest students. The university I chose promulgated this assertion, and throughout my lengthy academic career, every institution I attended held exceedingly high educational standards. I was presented with myriad opportunities for academic advancement, took masters' level classes as an undergraduate, and was accepted into my first choice of doctoral programs. I have always been surrounded by academics and books.

As I went through graduate school and learned about the red flags for the development of learning disabilities, it brought to the surface memories of my own development. As early as three I can remember music time at school, when there were songs playing and everyone clapped to a beat. I, however, could not, and still cannot, clap to a beat. I remember my lack of rhythm and coordination over the years being the brunt of many jokes – and I laughed along – but secretly I always wondered what was wrong with me. Why couldn't I keep a beat? It looked really easy for everyone else. Another red flag was that I never crawled. Instead, I shuffled on my knees (which required a lot of patching of holes on the part of my mother). Today, these facets of my development would have been considered, and thanks to evolving science, it would have been evident that I was predisposed to learning deficits. However, at that time, the breadth of research that we have today wasn't available, and I slipped through the cracks of atypical development and into the school system.

Because I started my education in a private setting, the local public school administrators had to make sure I was well suited for first grade in their system. They put me through an interview with the principal and a session with the school psychologist, who administered the Wechsler Preschool and Primary Scale of Intelligence, Revised (WPPSI-R). I remember the interview with the principal very well. He gave me the projective drawing tests House-Tree-Person and Kinetic Family drawings that also test visual spatial skills, and I certainly remember when he asked me to make a “3.” I remember because I drew my 3 backwards, and I was so upset. While I was aware of this mistake, I certainly made plenty of which I was not aware. Unfortunately though, there were not enough mistakes for anyone to take notice, including the school psychologist. My WPPSI-R results indicated that I scored in the very superior range for all things visual and in the high average range for all things verbal. Today, a discrepancy of over two standard deviations would be a glowing red flag. There would be speech/language services, and the learning differences and language-based reading deficits would have been detected. However, in the early ‘80s, they stamped me as smart and enrolled me in public school despite my significant IQ discrepancy and language based learning disability.

In first grade, I remember being tested for math and reading at the beginning of the year. I was placed in the highest group for math, but was crushed when I was placed in the regular reading group. I knew reading was hard, but I was too young to advocate for myself, and there were no obvious signs to alert the adults in my life that something was not right. It was the early ‘80s, and awareness was not what it is today. I was embarrassed I had not made the highest reading group, and the thought of drawing attention to my failure felt too shameful. So instead of learning to become a better reader, I taught myself very early to compensate.

By the second grade I had gotten sneaky. We had short stories at different levels, and we worked at our own pace to move up through the levels. Although we all started at the same level in the beginning of the year, I could not read as fast as everyone else, and it took me longer to move up than it did my classmates. Embarrassed, I decided to devise my own system. Our SSR (Sustained Silent Reading) class was right after lunch, so during lunch recess I would ask to go inside to use the bathroom. In reality however, I would sneak into my classroom to read the questions that were at the end of the stories I would be reading that afternoon. Though provision of questions prior to reading a passage is a common accommodation for today’s second graders, when I was in second grade the questions were not provided until after the story. I discovered that if I knew what I was reading for, I could skim the lines and usually glean enough information to answer the questions. Still, I struggled to progress with my peers, all the while so envious of their reading successes.

In third grade, I finally found someone to whose reading I could relate, Helen Keller. She read with her hands, not with her eyes. I gorged myself on books about Helen Keller, during which I realized that there are two ways to read, one of which didn’t involve seeing words on paper but in the mind. So at eight years old, I taught myself to read Braille with my eyes closed. I remember feeling each pattern of raised dots and teaching myself to equate the individual pattern with its corresponding letter. It was as if my fingers were directly connected to my visual cortex, and I’d inadvertently found a way to bypass my eyes. Braille was about recognition and sequencing more than decoding, a textural orthography that translated to an accessible phonological system. Unfortunately, I was not educated in Braille, so my newly found skill eventually faded.

As I progressed through my early elementary years, it became glaringly obvious that I was not a good speller. Phonological awareness did not come easily to me, and in many respects, I do not think it came at all. I remember sitting on stools in my kitchen drilling with my mother while she cooked, but the spellings never stuck. I pushed myself to hear the words, but so many letters sound the same. For example, I clearly remember learning to spell the word “bicycle.” There is a natural rhythm (rythym) to the word that was helpful, but my problem was that i and y sound the same. So why isn’t it bicycle or bicicle? Consistency would make much more sense, but such are the pitfalls of English. Years later I realized that bi is two, and there are two wheels on a **bicycle**, so **bi**-cycle. Finally I had a rule – and one that made sense to me – to remember in what order to put the letters, similar to the rote memorization of “**i** before **e**, except after **c**, and when it sounds like **a** in neighbor and weigh” – brilliant!

By middle school, reading had not become any easier, but I always earned great grades in the highest-level classes. I felt no one would have believed me if I verbalized my frustrations. So, by seventh or eighth grade, I just stopped reading and kept my mouth shut. By eliminating reading, I had eliminated my problem. My grades didn’t change when I stopped reading, so I muddled through, getting the grades I needed to stay in the classes I wanted, but all the while feeling like I was the dumbest kid in my classes. Sometimes I would express doubts about a test, but friends and family would say, “no way, you never fail.” Asking for help seemed futile, and as I progressed through school, things became bleaker. I spent a lot of time feeling like academic plankton, but I made it through, somehow maintaining an A average in advanced placement and honors classes. I absorbed as much as I could listening to the teacher and used my friends later to fill in the gaps.

College Years

By college it was clear to me that I wasn’t going to learn from textbooks. However, I found that I could get enough information from the lectures to make the pictures in textbooks make sense without having to understand the

words – and I found my way through. I didn't feel like the dumbest one anymore, because I had finally mastered how to get around reading - listening.

Before finishing college, I was accepted into a doctoral program in clinical psychology, with a specialization in neuropsychology. By the time I started graduate school, I was not even buying all of my books anymore. I chose not to buy any book I thought irrelevant to my future and bought only those relating to the field of neuropsychology that I might need for reference. Since I was technically in a psychology program, this made for a significantly reduced book list.

While I do not think my classmates believed that I did not buy all of my books (I suppose they thought I was hoarding them at home), I did not understand why they needed every single book that was recommended. They attended the same classes, listened to the same lectures, but still they turned to their books when it was test time. I, however, reviewed my notes and listened during study groups. No books, no problems.

Books or no books, I made it through grad school with a 3.97 grade point average. I even wrote a dissertation in four months. I had secured a statistician/editor for my work, Dr. M (well, maybe not secured as much as cornered and manipulated), and with nose to the proverbial grindstone and the support of my friends, family, and unwavering mother, Dr. M and I finished my dissertation. Still, no one knew I struggled to read, and now, at 26, I had a PhD in my hands to validate everyone's misconceptions.

Professional Life and the Journey Begins to Improve Reading

The Vision Path

Fast forward about half a decade to my time working as a pediatric neuropsychologist in a private children's neurology practice, when a developmental optometrist (the second author), Dr. G, came in to give an in-service on visual processing and vision therapy. When he randomly picked me out of the group to take one of his tests, I failed miserably. He joked that it was probably the distance or angle to the test that was responsible for my failure. But then the man next to me, well over a score my senior, passed the test with flying colors, and the failure was all mine. So after his presentation, Dr. G asked if I would like to come over to his office, take a look at what he does, and perhaps check out my vision. I accepted, and my journey began.

Dr. G diagnosed me with significant convergence insufficiency and accommodative infacility. I could read for only two pages before the words became blurred and double. The ReadAlyzer documented my slow, choppy reading, as well as my proclivity to reread (192 wpm – words per minute – with 28 regressions (5th grade level) while reading 6th grade material. I followed Dr. G's recommendation for VT, hoping that in three to four months I was going to love to read!!! Dr.

G seemed confident reading would be much easier after VT, so I excitedly forged ahead. As the therapy progressed, I felt like I was making progress. I was excited, faithfully practiced my homework, and was encouraged when my therapists told me that I was making gains. The words were less blurry, I felt like I was rereading less, and it seemed as though I could read more comfortably and for longer periods of time.

I completed the protocol, and my convergence and accommodative issues were resolved. My reading speed had increased somewhat from 192 to 222 wpm, with regressions improved slightly from 28 to 25 (5th to 7th grade level) while reading 6th grade material. So why were words still not meaningful? I knew my spelling and sequencing had not changed, and I continued to make typing errors such as "I've not that the please of" as opposed to "I've not had the pleasure of," as for and, a for the, of replaced for, send for sense, and doog for good. But why hadn't my reading changed? Why did I still read firefox as foxfire, symptoms for synonyms, or "I the room went into" for "I went into the room?" Why couldn't I read long low frequency words fluidly? Why were hyphenated lines so difficult to maneuver? Why did I still feel like books were empty?

After mentioning that the words still seemed to move on the page, Dr. G and I realized that part of my problem was the contrast between the page and the text. The background was bright and the letters would get lost – the white background encroaching on the black letters, blurring their edges and making them smaller. Dr. G suggested that we retest my reading using a blue filter, which helped with the stability of the letters. The ReadAlyzer revealed that although my reading speed was about the same (229 wpm), my regressions had improved from 25 to 19 (7th grade level to a 10th grade level) on 6th grade material. Dr. G recommended a consult with an Irlen lens specialist, which I explored. However, due to a combination of the lack of compelling research and the prohibitive cost of the evaluation and lenses, I chose not to pursue this avenue. After all, months of vision therapy didn't do it; were colored lenses really going to do the trick? I wasn't convinced, so I resorted to my cumbersome blue overlay. While reading the words was a bit easier, the content still didn't make sense. I was disappointed and sad and felt like I'd done something wrong. I felt like Dr. G had wasted his time and resources on me, and that now there was literally no hope I would ever enjoy reading. Eventually I tossed the overlay and put down my books. And that was that – or so I thought.

The Attentional Path

One glorious fall day in late November 2012, I went to see Dr. T, a neuropharmacologist, for treatment of anxiety. During our interview he went farther afield and asked about my attention. I'd always known attention was an issue for me, but I wasn't ready to accept those four big letters, and I snapped at him, "I do not speak to doctors about my

attention.” Appearing intrigued by my response, Dr. T quickly opened his desk drawer and pulled out the Adult Self-Report Scale Symptom Checklist for AD/HD (1-4 Likert scale rating forms). I rolled my eyes, and after about five minutes of fervently circling fours, Dr. T looked up and informed me that I was experiencing significant symptoms in the areas of both inattention and hyperactivity. My world stopped: I’d been found out.

I guarantee that just about any friend I have ever had knew about my struggles with attention and hyperactivity – not to mention my graduate school cohort of overly excited budding diagnosticians – and would roll at least one eye and ask for an honorary MD after hearing Dr. T’s diagnosis. I was in middle school when my friends started telling me I had “ADD.” I remember wondering: if it is so clear to me and to my friends, but not to my family, teachers, or doctors, am I faking?

Dr. T quickly suggested a stimulant. I was very hesitant to try what could only be considered a neuroenhancer in my case, as I was so well compensating, but I decided to put a bit of trust in this stranger who had come highly recommended and filled the prescription.

When I went back for my first follow up, Dr. T asked how I was doing. Excited, I blurted out, “I can read!” Dr. T seemed a bit taken aback that all I could focus on was being able to read better. I don’t think the stimulant was doing what he had expected, but regardless, I COULD READ. Dr. T probed areas such as my organization, my impulsivity, my motion, and my distractibility. While these were all slightly changed, they were far and away trumped by my daily conquests in reading.

What I hadn’t realized was that my brain had been disorganized, inefficient, and unwilling to work cooperatively, in constant motion. Similarly, it’s as if the components of books were in motion. Not only a physical motion like double or blurring vision, but pieces were everywhere. Letters here, words there. On occasion a concept or two emerged, but nothing tangible or meaningful. However, the stimulant seems to unify and align all of the different facets of my brain, and that is what I find with books as well. With the stimulant, the letters align into words, the words follow one another to make sentences, the sentences create paragraphs, and so on. When all of these pieces fall into place, and the sequence is sustainable, the culmination of written words has meaning. I believe the key is sustainability. While individual words have, and always had, meaning, and a sentence can, and always could, convey an idea, the paragraph level is where my breakdown occurs. As evidenced by the ReadAlyzer, I have a strong proclivity to reread, which I believe was double pronged. While visual efficiency and processing deficits were contributory, I feel that my tendency to reread is primarily attentional. With the stimulant, I am aware when I have tuned out because I no longer understand what I am reading. Now that I am aware when I am no longer engaged, I successfully go back

in the text and find the last section I remember reading. Before, I could have gone back to the beginning of the text without recognizing a single concept.

Reading Takes Hold

Initially I was hesitant to share this news with Dr. G, but he had seen me through many tough times over the course of my VT. He deserved to know. So I told him in an email how amazing it was that letters actually do go together to make words, that words actually do go together to make sentences, that sentences actually do go together to make whole paragraphs, and wow, you can learn something from a paragraph! But what impressed him most was my observation that “now when I read, books are rich and so full of information, it’s amazing! Before I couldn’t create mental images when I read, which is how I learn. As people talk I construct visual images and from those I learn because they stick. Now that I can read, the images create themselves as I go so that everything makes sense.” And it’s true. The way that I understand a concept is to visualize it. I then rotate its form in my mind so that I can explore all sides and develop a comprehensive and integrated understanding. While I find this easiest to do from visually based stimuli, such as geometry, and I have learned to use this strategy with spoken words, never before had I been able to do so with the written word.

The first book that I picked up after starting the stimulant was a book on neuroanatomy. It was a topic I had been studying for years, but always felt as though something was missing. Now as I read I could see the brain in three-dimensional space and I was able to rotate it, exposing the structures and pathways I had been reading about. Amazingly, it clicked, it just clicked, a perfect tribute to Dr. Kohler and his Aha moment.³

The first book that I read cover to cover, after I discovered that in fact I do love to read, was *The Dyslexic Advantage: Unlocking the Hidden Potential of the Dyslexic Brain* by Dr. Brock L. Eide and Fernet F. Eide.⁴ This book offered me new perspectives from which to conceptualize my learning strengths and weaknesses, and while I purport to understand the manner by which children learn, I had not acknowledged the manner by which I learn. The Eides propose a structure for conceptualizing the brains of dyslexics. They identify four main strengths that characterize a dyslexic brain. They call them MIND strengths - M: Material Reasoning; I: Interconnected Reasoning; N: Narrative Reasoning; and D: Dynamic Reasoning.⁴ Respectively, strengths are reflected in the ability to reason about material constructs, make novel connections between constructs, create full narratives from memories, and predict from embedded patterns. While reading, I was able to relate to each of the different types of reasoning and identified with both the strengths as well as the weaknesses described.

The Eides suggest that in the majority of nondyslexic brains, strengths are reflected in areas related to logical

reasoning, speed and accuracy, automaticity, replicability, focus, concision, and that they do well applying rules and procedures, finding primary meanings, and spotting differences. They also suggest that the strengths of the dyslexic brain are in understanding the gist, or the big picture, and that strengths are reflected in the areas of inferential reasoning, multidimensional perspective, obscure connections, inventiveness, and mindfulness. Their offering that “dyslexic brains store information like murals or stained glass, connect ideas like spider webs or hyperlinks, and move from one thought to another like ripples spreading over a pond,”³ resonates loudly and sums up beautifully how I feel my mind works. While I have strengths and weaknesses of both cortical organizations described by the Eides, their book helped me to understand my history as it relates to my reading and language-based deficits, as well as the compensatory strategies I created for myself as a youngster and continue to adapt to my daily functioning as an adult.

I remember the first time I was able to follow written directions: it was March 2, 2013. Previously, when directions were written, they did not make sense. So when my new wireless internet router arrived, I tore open the box and, as usual, tossed the directions. I followed the colors and plugged everything from the old router into the new one, and voilà, I thought it would just work. Unfortunately, it didn’t “just work.” So I fished the directions out of the recycling and I looked them over. I fiddled with a few things, got frustrated, and called tech support. While on hold for tech support I looked at the directions again, and actually read them. When I did, I found meaning – for the first time I was able to pull information from the words. While on hold, I was able to follow the directions and activate the router on my own! It felt amazing to be able to understand technical directions with only words and no pictures and to be able to accomplish something I thought I could never do independently.

Vision Re-Examination

I scheduled a meeting with Dr. G to retest my reading while on the stimulant, and I became immediately nervous. I felt like this was going to be the make or break moment for me: an answer, or my final dead end. So when I returned to Dr. G’s office while on the stimulant, I was incredibly relieved when he confirmed that I was indeed reading more efficiently. The ReadAlyzer revealed that my reading speed had improved to from 229 to 287 wpm with only 7 regressions (post high-school level) while reading 6th grade material. This was much improved from 25 regressions (7th grade level) after VT. The pattern still held while reading 10th grade material (6 regressions).

I also took the TOWRE (Test of Word Reading Efficiency) pseudoword decoding test, which showed that the fluency of my phonemic awareness was at a 9th grade level. While Dr. G reported my phonemic awareness as “only at a

9th grade level,” I was beyond proud of myself. “Only a 9th grade level?” Didn’t he mean, “A 9th grade level!!!!” While I do attribute some of my phonemic facility to my job, as I administer tests of pseudoword decoding regularly, and at least one of the words was the same as one on the TOWRE, I was so pleased to learn that my decoding isn’t as awful as I’d thought. Maybe by Dr. G’s measures my decoding is poor, but by my observations of my life-long phonemic struggles, I think a 9th grade level is a remarkable success.

Discussion

While the debate rages on about the possible causes and neurophysiological correlates of dyslexia, I seem to have characteristics that support many of them. My early and persistent difficulties with phonemic awareness and decoding, as well as the significant differential in my IQ, speak to the language-based theory of dyslexia espoused by Shaywitz.⁵ My difficulties with color, contrast, sequencing, and print stability echo the magnocellular theory of dyslexia⁶ and visual spatial inattention.⁷ My lack of rhythm and crawling suggest cerebellar involvement⁸ or possibly delayed sensorimotor development.⁹ Compounded by poor accommodative/vergence skills and AD/HD, it’s understandable that reading has been my battleground. Would my story be different if I had Orton-Gillingham or Wilson reading tutoring as a child, or perhaps Lindamood-Bell to teach me to visualize what I was reading? Or VT, Fast Forward, speech/language therapy, colored filters, ADHD meds? The list goes on.

This journey has not come without emotional expense or intellectual conflict, and while some may consider the journey more important than the destination, it is my strong opinion that the greatness of this destination far exceeds the pain of the journey. So where has this long road left me? With a book in my hands. I cannot get enough. I yearn to read. I want to know what’s in all books. I set my alarm early at least six days per week, take the stimulant and go back to sleep for an hour. When I wake up, my brain is ready to read. I am often late for work now, something that never occurred before, but it is worth every minute. I want the information in my head, and now I can transport it there. There is so much I want to know and so much good I believe I can do with my mind. I just needed a pharmacological conductor to organize my orchestra. It is there now, all of the sections playing together in harmony, the words creating beautiful music in the form of pictures in my head. Both the world and my potential feel limitless now; the only thing holding me back from knowing everything there is to know in this world is time. I wish I could have all the time back from the last 34 years that I didn’t spend reading, but I’m excited to infuse the next 34 years with the richness of words - those things that go together to make sentences, paragraphs, and books with information. Yes, those will be a huge part of my future.

Conclusion

There are a multitude of factors that affect reading, and as professionals working with children we must be careful not to think that any one profession has all the answers. The interdisciplinary and multivariate nature of reading challenges professionals to know and understand the approaches of other professions, but above all to recognize that our patients will be best served by collaboration.

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Chase D, Gallaway M. Viewpoint: The multi-disciplinary nature of reading—a personal journey. Optom Vis Perf 2014;2(4):190-5.

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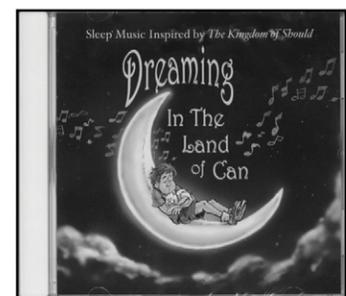
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